

Supplemental Application Data SheetApplication Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: ANTISENSE COMPOUNDS, METHODS
AND COMPOSITIONS FOR TREATING
NGAL-RELATED INFLAMMATORY
DISORDERS
Attorney Docket Number:: 1506-1035-1
Request for Early
Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 2
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: ANDREAS
Middle Name::
Family Name:: DIECKMANN
Name Suffix::
City of Residence:: BROMMA
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing MARGARETELUNDSVAGEN 76
Address::
City of Mailing Address:: BROMMA
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: SE-167 36

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: ROBERT
Middle Name::
Family Name:: LOFBERG
Name Suffix::
City of Residence:: DJURSHOLM
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing EKEBYVAGEN 9
Address::

City of Mailing Address:: DJURSHOLM
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: SE-182 55

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: OLIVER
Middle Name::
Family Name:: VON STEIN
Name Suffix::
City of Residence:: SPANGA
State or Province of Residence::
Residence::
Country of Residence:: SWEDEN
Street of Mailing Address:: BATSMAN STENS VAG 23
Address::
City of Mailing Address:: SPANGA
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: SE-163 41

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: PETRA
Middle Name::
Family Name:: VON STEIN
Name Suffix::
City of Residence:: SPANGA
State or Province of Residence::
Residence::

Country of Residence:: SWEDEN
Street of Mailing BATSMAN STENS VAG 23
Address::
City of Mailing Address:: SPANGA
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: SE-163-41

Applicant Authority Type:: Inventor
Primary Citizenship Country:: CANADA
Status:: Full Capacity
Given Name:: LIAM
Middle Name::
Family Name:: GOOD
Name Suffix::
City of Residence:: STOCKHOLM
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing TEKNOLOGGATAN 9B
Address::
City of Mailing Address:: STOCKHOLM
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: 113 60

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/407,954	9/5/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0202244-0	7/17/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::